

Survey Closing Soon! (Jan 18)

Thank you to all the nurses who took a moment to share valuable input. We will be closing the survey on 1/18/26. So for those who haven't yet, here's your last chance!

To recap: we shared a summary of the memorandum of understanding covering how joining the Mares and Central campuses would work at the beginning of the month. The MOU would include two kinds of proposed changes: terms that apply to all nurses at both campuses and terms that address the issues that are specific to just Mares Campus nurses.

The summary is posted on the WSNA website but here's a shortcut: <https://tinyurl.com/ConfluenceSummary>

SURVEY DETAILS:

Please complete this important and **BRIEF** survey to share your feedback about 3 key areas:

1. How should seniority be handled?
2. Your thoughts on Central and Mares Campus joining under a single contract
3. The terms and benefits of the MOU

The link to the survey was emailed and texted to folks. It's also posted on the WSNA website: <https://www.wsna.org/union/central-washington-hospital>

Follow Up On Questions

Shout out to nurses who took the opportunity to raise additional question on the survey. Folks also asked great questions during info sessions and with our WSNA Nurse Rep, Laurie Robinson, while she has been rounding. We wanted to make sure to loop back around on them here so that everyone had access to the same information.

How will we negotiate future contracts if our bargaining unit covers more than one hospital campus?

If the units merge, we'd negotiate over the terms that apply at the Mares campus during our regular Central bargaining sessions the same way we do for existing Central members who work at other campuses like the Infusion RNs who work at Mares, Moses Lake, and Omak and the Home Health and Hospice nurses who work out of the Home Care building on Chelan Ave. Just like any other unit, we'd meet with member before negotiations to hear their concerns and advocate for their needs at the bargaining table.

If Mares nurses join the Central bargaining unit, will their start times and scheduling rules change?

No. Nurses' wages, hours, and working conditions are all considered mandatory subjects of bargaining under the NLRA, so management can't make changes to things like standard start/end times or scheduling rules without bargaining with WSNA. In other words, the current (or "status quo") start/end times should stay the same unless we agree to specific language that changes those start times or gives management the right to change them. WSNA's contract at Central does not set specific start/end times for standard shifts or give management the right to do so, so status quo shift start/end times should remain in place for all WSNA-represented units at Central, Mares, Moses Lake, and Omak.

If Mares nurses join the Central bargaining unit, how will their low census rules change?

Currently, Mares nurses receive four hours of report pay if they're told not to report to work less than two hours before their shift begins. At Central, nurses receive four hours of report pay if they're told not to

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Follow Up On Questions (continued)

report less than one hour before their shift begins. For most nurses at Mares, moving to a shorter notice period won't change much, but the two-hour notice period matters a lot to others, especially nurses who live more than an hour from the hospital.

To address their concerns, the Mares bargaining team proposed language that adopts Central's one-hour notice period as a default rule but keeps the two-hour notice period in place for nurses whose home address is more than one hour from campus. Management was open to this idea if it could apply to nurses in the existing Central unit as well. With that in mind, the Mares bargaining team has suggested including it in the MOU so nurses who work at Central, Moses Lake, Omak, *and* Mares can benefit from a longer report period if they live far from campus.

What if I support bringing the two groups together (because I actually like the idea of shared seniority and negotiating together), but I don't like the idea of a separate MOU attached?

We get it. It seems complicated to have a separate MOU to address issues specific to Mares. But to recap, an MOU is a legally binding document that captures agreements between parties during the life of the contract; for example, Central nurses used an MOU to set terms for Infusion RNs in 2024. When the next contract is negotiated, parties often either attach the MOU to the contract as a new Appendix (like Central did in Appendix I) or incorporate the terms of the MOU into the main contract so a separate document isn't needed. Here, if the two units were to join together, we would use an MOU to set terms that add Mares nurses to the Central bargaining unit for now, capture any key areas of difference between campuses, and improve wages and working conditions at both facilities. When we negotiate for our next contract term in 2028, we would either add the MOU as an Appendix or incorporate the MOU's terms into the relevant articles of the contract, at which point the MOU itself can be removed.

I just want to make sure that our bargaining unit is strong. Does combining Central and Mares strengthen Central's bargaining unit? Anytime a health system corporation gets to negotiate with two groups of nurses separately, it is an opportunity water down nurses' ability to advocate with our full collective strength. Nurses that have the chance to work together versus separately are always going to be stronger when it comes to negotiations. We have already seen that with the groups of nurses we have just recently brought into the Central contract.



We Aren't The Only Ones: WSNA Nurses In the Region Raise Standards for All Nurses in Ellensburg by Uniting Together

Just over in Ellensburg, 38 nurses are in the process of joining 135 of their WSNA represented colleagues at Kittitas Valley Healthcare with the support of the team. What do the KVH nurses stand to gain? You bet they will be stronger at the table with a 30% larger voice.



L: Clinic nurses ask the employer to voluntarily recognize WSNA, joining represented colleagues at KVH. R: WSNA KVH negotiating team in solidarity with the clinic nurses at the bargaining table.